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Bib Data Sheet

|                             |                                   |              |                        |                                   |
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 06/28/2001**

**\*\* SMALL ENTITY \*\***

|  |                        |                     |                    |                         |
|--|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR COUNTRY<br>CA | SHEETS DRAWING<br>1 | TOTAL CLAIMS<br>24 | INDEPENDENT CLAIMS<br>5 |
| 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance |                        |                     |                    |                         |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____   |                        |                     |                    |                         |

**ADDRESS**

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**TITLE**

Pivot point arm for a robotic system used to perform a surgical procedure

|                            |   |  |
|----------------------------|---|--|
| FILING FEE RECEIVED<br>471 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
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